December 9, 2005

FCC Office of the Secretary 445 12<sup>th</sup> Street SW Washington, CD 20554

RE: CC Docket No. 02-6

DOCKET FILE COPY ORIGINAL

RECEIVED & INSPECTED

DEC 1 6 2005

FCC - MAILROOM

Entity appealing:

Rylander Memorial Library 103 S. Live Oak San Saba, Texas 76877 Fax: 325-372-3079 Phone: 325-372-3079

Email address:

Decision appealed:

Funding Year: 2005
Date of document: 07/29/2005
471 Application #: 458867

Applicant's Form Identifier: 47105

## **Additional Explanation:**

Rylander Memorial Library respectfully appeals the Certification Postmarked Outside of Window decision.

Rylander Memorial Library made a good faith effort to meet all deadlines regarding the filing of Form 471, the Block 6 Certification pages and Item 21 Attachments. Specifically, the Form 471 was submitted electronically on February 12, 2005. The Authorized Person, Christine Bessent, signed and dated the Block 6 Certifications and Signature page on February 14, 2005. The Block 6 Certifications and Signature page was faxed to USAC on February 18, 2005 in order to certify the application before the February 18<sup>th</sup> 11:59 pm deadline. On July 14, 2005, a SLD representative contacted Rylander Memorial Library requesting them to fax in one of the Block 6 Certification pages.

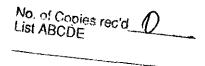
Because Rylander Memorial Library met all deadlines and because SLD has requested Block 6 by fax, Rylander Memorial Library is requesting SLD to certify the application within the filing window.

Sincerely,

Rylander Memorial Library

Attachments:

February 18, 2005 correspondence July 14 & 21, 2005 correspondence



February 18, 2005

TO: SLD-471 contification page 888-276-8736 From: Rylander Memorial Library Centity# 141179 471# 458867

attached page Signed contification page

Ent	tity Number 141179	Applicant's Form Identifie	<sub>r</sub> 47105
	tact Person Christine Bessent	Phone Number	915 372-3079
31 >	X i acknowledge that the discount level used for disadvantaged schools and libraries that are t	shared services is conditional, for future years, upo eated as sharing in the service, receive an appropr	on ensuring that the most tate share of benefits from those services.
32 >	all documents necessary to demonstrate com of services receiving schools and libraries dis	r a period of at least five years after the last day of bliance with the statute and Commission rules regal counts, and that if audited, I will make such records to participation in the schools and libraries program	roing the application for, receipt of, and delivery available to the Administrator.
33 >	certify that I am authorized to submit this requested that all of the information on this form is true at this application have complied with the terms, statements on this form can be numished by fi	nunications and other supported services for the eligible on behalf of the eligible entity(les) listed on this and correct to the best of my knowledge, that the entronditions and purposes of the program, that no kid is or forfeiture under the Communications Act, 47 Les Code, 18 U.S.C. Sec. 1001 and civil violations or	application, that I have examined this request, ities that are receiving discounts pursuant to ities that are receiving anyone and that false J.S.C. Secs. 502. 503(b), or fine or
	from their participation in the schools and libra institute reasonable measures to be informed, this application, or any person associated in a violation or held civilly liable for acts arising fro	sons who have been convicted of criminal violations ries support mechanism are subject to suspension and will notify USAC should I be informed or becom by way with my entity and/or the entities listed on the mother participation in the schools and libraries sur	and debarment from the program. I will ne aware that I or any of the entities listed on is application, is convicted of a criminal aport mechanism.
35 >	! certify that if any of the Funding Requests or ineligible components, that I have allocated the rules at 47 C.F.R. Sec. 54.504(g)(1), (2).	this Form 471 are for discounts for products or sense cost of the contract to eligible and ineligible compo	vices that contain both eligible and onents as required by the Commission's
36 ×	violation of the Commission requirement that of	titute a request for internal connections services, ea ligible entities are not eligible for such support more by the Commission's rules at 47 C.F.R. Sec. 54.50	e than twice every five funding years
37 >	services reatured on this form 4/1 are net of	sts for eligible services will not be paid by the service any rebates or discounts offered by the service pro- ported service, of free services or products unrelated of the supported services.	ider. I acknowledge that, for the purpose of
38	Signature of authorized person	39 Da	ate 2/14/05
40	Printed name of authorized person		
	Christine	3 essent	
41	Title or position of authorized person		
	Librarian		
42a	Street Address, P.O. Box, or Route Number		
	103 S. Liv	e Oak	
	City		
	San Saba		
	State Zip Code		
	T X 7 6 8 7 7		4 1
42b	Telephone number of authorized person	Ext 42c Fax num	ber of authorized person
	3 2 5 3 7 2 3 0		
42d	E-mail address of authorized person		
	rylander@sa	nsabacounty	.org

Fw: Form 471 CERT - Application ID: 458867 - PR Cas...

---- Original Message ----

From: SLD Problem Resolution

To: 'RYLANDER@SANSABACOUNTY.ORG' Sent: Thursday, July 14, 2005 1:57 PM

Subject: Form 471 CERT - Application ID: 458867 - PR Case ID#: 21-281208

## Christine,

We are making this contact with you to obtain the necessary information to successfully data enter your 471 Cert. Here is the information we need from you so that we may complete data entry of your application for E-Rate Discounts:

You are missing page 1 of your Certification, more specifically items 24-30.

Please make these corrections to your form and fax to my attention at 888-276-8736 or email the corrections to my attention at <u>sld-problem-resolution@pearson.com</u>. Please reference the application number or form identifier and include your full name and title in all correspondences. If you have any questions, please call me at 888-203-8100 and reference case number 21-281208.

It is important that we receive all of the information requested so that we can finish processing your form. If you are unable to provide the requested information because your school has closed or will shortly close for summer break, please let me know when you will be available to respond to these questions.

If we do not receive the information within seven calendar days, your application will be reviewed using the information currently on file.

Thank you,

Janel Horton

Client Service Bureau/Problem Resolution

Schools and Libraries Division

Help Line: (888) 203-8100

Fw: Form 471 CERT - Application ID: 458867 - PR Cas...

Fax: (888) 276-8736 E-Mail: sld-problem-re

E-Mail: sld-problem-resolution@pearson.com

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

This email may contain confidential material. If you were not an intended recipient, Please notify the sender and delete all copies. We may monitor email to and from our network.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

No virus found in this incoming message.

Checked by AVG Anti-Virus.

Version: 7.0.323 / Virus Database: 267.8.15/49 - Release Date: 7/14/2005

No virus found in this outgoing message.

Checked by AVG Anti-Virus.

Version: 7.0.323 / Virus Database: 267.8.15/49 - Release Date: 7/14/2005

Peggy York PO Box 968 Goldthwaite, Texas 76844 Voice: 325-938-9868

Fax: 325-938-5768 peggy@centex.net

## **FAX SHEET**

To: Janel Horton	From:	Rylander Memorial Library
Fax: 888-276-8736	Pages:	2 including cover page
Phone:	Date:	7/21/05
Re:	CC:	

Regarding:

Form 471 Certification Application ID: 458867 PR Case ID #21-281208

Attached is page 1 of the certification page.

Application ID: 458867

Entity Number 141179	Applicant's Form Identifier	47105
Contact Person Christine Bessent	Phone Number	915 372-3079

## **Block 6: Certifications and Signature**

- 24 X I certify that the entities listed in Block 4 of this application are eligible for support because they are: (Check one or both.)
  - a schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. Secs. 7801(18) and (38), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million; and/or
- 25 I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed on this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).

а	Total funding year pre-discount amount on this Form 471 (Add the entries from Items 23I on all Block 5 Discount Funding Requests.)	1	4	2	9			8	0
b	Total funding commitment request amount on this Form 471 (Add the entries from Items 23K on all Block 5 Discount Funding Requests.)	 1	1	4	3		-	8	4
С	Total applicant non-discount share (Subtract Item 25b from Item 25a.)		2	8	5			9	6
d	Total budgeted amount allocated to resources not eligible for E-rate support				0			0	0
e	Total amount necessary for the applicant to pay the non-discount share of the services requested on this application AND to secure access to the resources necessary to make effective use of the discounts. (Add Items 25c and 25d.)		2	8	5	· · · · · ·		9	6
f	Check this box if you are receiving any of the funds in Item 25e directly from a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item 25e.								

- I certify that all of the schools and libraries or library consortia listed in Block 4 of this application are covered by technology plans that are written, that cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body, and an SLD-certified technology plan approver, prior to the commencement of service. The plans were written at the following level(s):
  - an individual technology plan for using the services requested in this application; and/or
  - b  $\,$  higher-level technology plan(s) for using the services requested in this application; or
  - c no technology plan needed; applying for basic local and long distance telephone service only.
- I certify that I posted my Form 470 and (if applicable) made my RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan goals.
- 28 X I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have complied with them.
- I certify that the services the applicant purchases at discounts provided by 47 U.S.C. Sec. 254 will be used solely for educational purposes and will not be sold, resold, or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. Sec. 54.500(k). Additionally, I certify that the Billed Entity has not received anything of value or a promise of anything of value, other than services and equipment requested under this form, from the service provider(s), or any representative or agent thereof or any consultant in connection with this request for services.
- I certify that I and the entity(ies) I represent have complied with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. There are signed contracts covering all of the services listed on this Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.

